

**INSTRUCTIONS FOR PREPARING
THE SENIOR COMMUNITY SERVICES EMPLOYMENT PROGRAM
BUDGET (TITLE V)
(CDA 35 Rev 3/04)**

PAGE 1 BUDGET SUMMARY

Heading: Enter the budget period, original or amendment number, contract number, number of slots, budget date, and PSA number. The contract number shall consist of the letters TV, the fiscal year, and the PSA number. (e.g., TV 0405-34).

Cost Categories: The lines in this section list allowable cost categories for reporting costs for Administration, Program/Participant Wages and Fringe Benefits (PWFB), and Program/OTHER Costs.

State funds may only be used for participant wages in cost categories Personnel, Trial Employment, and On-the-Job Experience.

Section A:

Administration

- Enter Personnel and Operating Costs, by funding source in columns (a) and (b). Trial Employment and On-the-Job Experience costs are not allowable per PM 03-21.
- Calculate Total Personnel Costs for columns (a) and (b). The total of these columns should agree with page 2, Section A. Calculate Total Operating Costs for columns (a) and (b). The total of these columns should agree with page 2, Section B. Enter Indirect Costs to calculate Total Operating and Indirect Costs for columns (a) and (b).
- Calculate Total Costs for columns (a) and (b) by adding Total Personnel Costs to Total Operating and Indirect Costs.

Program/PWFB

- Enter Personnel Costs by funding source in columns (c) through (f).
- Calculate Total Personnel Costs for columns (c) through (f). The total of these columns should agree with page 3, Total Personnel Costs- Program PWFB.

Program/OTHER

- Enter Operating Costs by funding source in columns (c) through (f).
- Calculate Total Operating Costs for columns (c) through (f). Enter Indirect Costs to calculate the Total Operating and Indirect Costs for columns (c) through (f). The total of these columns should agree with page 4.
- Calculate Total Costs for columns (c) through (f) by adding Total Personnel Costs for Program/PWFB to Total Operating and Indirect Costs.

Total

- Add columns (g) through (j), by funding source for each line as follows:

Column (g) Federal equals the total of columns (a) and (c)

Column (h) State equals column (d)

Column (i) Federal Match equals the total of columns (b) and (e)

Column (j) Program Income equals column (f)

Column (k) equals the total of columns (g) through (j)

Section B:

- Total Administration - for columns (a) and (c) enter the amounts found in Section A, Total Costs, columns (a) and (b), by funding source.
- Total Program/PWFB – for columns (a) through (d) enter the amounts found in Section A, Total Personnel Costs, columns (c) through (f), by funding source.
- Total Program/OTHER - columns (a) through (d) enter the amounts found in Section A, Total Operating and Indirect Costs, columns (c) through (f), by funding source.
- Total Costs - for each funding source add the lines in columns (a) through (d).
- To calculate Column (e), add columns (a) through (d) for each line.

Section C:

Compliance Instructions

Total Administration costs shall not exceed eight (8%) percent of the Federal allocation from the Planning Estimate.

Total Program/PWFB costs must be at a minimum of seventy-nine (79%) percent of the Federal allocation from the Planning Estimate.

Federal Match must be at least ten (10%) percent of the Federal Costs.

- Administration - Compute and enter the percent (%) of Administration to Total Costs. Divide Total Administration - Federal, by Total Costs - Federal.
- Program/PWFB - Compute and enter the percent (%) of Program/PWFB to Total Costs. Divide Total Program/PWFB - Federal, by Total Costs - Federal.
- Federal Match - Compute and enter the percent (%) of Federal Match to Total Costs. Add Section B, column (a) Total Costs Federal to Section B, column (c) Total Costs Federal Match. Divide this amount into column (c) Total Costs Federal Match.

Example:

Total Costs (Federal) = 10,000, Total Costs (Federal Match) = 1,500

Calculation: $10,000 + 1,500 = 11,500$

$1,500 \text{ divided by } 11,500 = 13\%$

PAGE 2 ADMINISTRATION BUDGET NARRATIVE

Heading: Enter the budget period, original or amendment number, contract number, number of slots, budget date, and PSA number. The contract number shall consist of the letters TV, the fiscal year, and the PSA number. (e.g., TV 0405-34).

Section A Personnel Costs

- Position Classification - List each position performing administrative functions for the Senior Community Services Employment Program.
- Annual Wage Rate - List the annual wage rate for each position noted above. Any position that is hourly should be annualized in this budget.
- % of Time Devoted - Enter the percent (%) of time each position spends performing administrative functions in this budget.
- Total – Multiply the annual wage rate by the percent (%) of time devoted. Enter the amount for each position listed.
- **Total Personnel** - Enter the total for all positions listed.
- Fringe Benefits – Enter the amount of Staff benefit costs for the positions listed.
- **Total Personnel Costs** – Add Total Personnel and Fringe Benefits.

Section B Operating Costs

- Travel - Enter total expenses in column (c).
- Equipment - List any equipment, quantity of items, unit price and enter the amount in column (c).
- Supplies – Enter the amount in column (c).
- Contractual – Enter the amount in column (c).
- Other – List miscellaneous operating costs and enter amount in column (c).
- **Total Operating Costs** – Enter the Total for Section B in column (c).
- Indirect Costs - Enter the amount of Indirect Costs budgeted for Administration, column (c).
- **Total Costs – Administration** - Add Total Personnel Costs from Section A, Total Operating Costs from Section B, and Indirect Costs. Enter the total in column (c). Total Costs - Administration must agree with Page 1, Section B, column (e).

PAGE 3 PROGRAM/PWFB

Heading: Enter the budget period, original or amendment number, contract number, number of slots, budget date, and PSA number. The contract number shall consist of the letters TV, the fiscal year, and the PSA number. (e.g., TV 0405-34).

Section A Personnel

- Participant Classification - List participants by classification.
- Number of Participants - Provide the number of participants scheduled to work in each classification.
- Wage per Hour - Enter the hourly wage of participants scheduled to work in the classification.
- Average Work Week Hours - Enter the average number of hours each participant will be working in this program.
- Average Number of Weeks - Enter the average total number of weeks participants will be working in this program.
- Total - Calculate the Total for each classification, column (e).
Calculation: column (a) x column (b) x column (c) x column (d) = column (e).

- **Total Personnel** – Total the amounts in Section A, column (e).

Section B Trial Employment

- Instructions for completing this section are the same as in Section A, above.
- **Total Trial Employment** – Total the amounts in Section B, column (e).

Section C Fringe Benefits

- Physicals - Enter the number of participants receiving physicals during the year and enter the total cost in column (e).
- FICA – Enter the fringe benefit amounts for FICA in column (e).
- Workers Compensation - Enter the fringe benefit amounts for Workers Compensation in column (e). **Please note that costs for Workers Compensation must be paid by the Contractor and can not be paid by the Host agency.**
- Other – List any other fringe benefits and enter the amount in column (e).
- **Total Fringe Benefits** - Total the amounts in Section C, column (e).
- **Total Personnel Costs – Program/PWFB** - Add Total Personnel, Total Trial Employment, and Total Fringe Benefit costs in column (e). This amount must agree with Page 1, Section B, column (e).

PAGE 4 PROGRAM/OTHER

Heading: Enter the budget period, original or amendment number, contract number, number of slots, budget date, and PSA number. The contract number shall consist of the letters TV, the fiscal year, and the PSA number. (e.g., TV 0405-34).

Section A On-the-Job Experience

- Participant Classification - List participants by classification.
- Number of Participants - Provide the number of participants scheduled to work in each classification.
- Wage per Hour - Enter the hourly wage of participants scheduled to work in the classification.
- Average Work Week Hours - Enter the average number of hours each participant will be working in this program.

- Average Number of Weeks - Enter the average total number of weeks participants will be working in this program.
- Total - Calculate the Total for each classification, column (e).
Calculation: column (a) x column (b) x column (c) x column (d) = column (e).
- **Total On-The-Job Experience** – Total the amounts in Section A, column (e).

Section B Other Operating Costs

Identify Staff and Other costs where applicable and allowable.

- Travel - Enter the total Travel costs.
- Equipment - List any equipment and a total amount.
- Supplies - Enter the total Supplies costs.
- Contractual - Enter the total Contractual costs.
- Orientation - Enter Staff Costs, Other costs and Total amount.
- Assessment - Enter Staff Costs, Other costs and Total amount.
- Training - Enter Staff Costs, Other costs and Total amount.
- Supportive Services - Enter Staff Costs, Other costs and Total amount.
- Job Development - Enter Staff Costs, Other costs and Total amount.
- Transportation - Enter Staff Costs, Other costs and Total amount.
- Other – List cost categories. Enter Total amount in column (e).
- **Total Other Operating Costs** – Total the amounts in Section B, column (e).
- **Total Operating Costs** - Add Total On-the-Job Experience and Total Other Operating Costs.
- Indirect Costs - Enter the amount of Indirect Costs budgeted for Program/OTHER, column (e).
- **Total Operating and Indirect Costs – Program/OTHER** -Add Total Operating Costs, and Indirect Costs in column (e). This amount must agree with Page 1, Section B, column (e).